



Bib Data Sheet

CONFIRMATION NO. 3011

|                                    |   |                     |                               |   |
|------------------------------------|---|---------------------|-------------------------------|---|
| <b>SERIAL NUMBER</b><br>10/008,425 | <b>FILING DATE</b><br>11/13/2001<br><b>RULE</b> | <b>CLASS</b><br>707 | <b>GROUP ART UNIT</b><br>2171 | <b>ATTORNEY DOCKET NO.</b><br>23-1-2-11-1 |
|------------------------------------|---|---------------------|-------------------------------|---|

**APPLICANTS**

Fabio M. Chiussi, Long Branch, NJ;  
Robert T. Clancy, Guilford, CT;  
Kevin D. Drucker, Annandale, NJ;  
Andrea Francini, Middletown, NJ;  
Nasser E. Idirene, Eatontown, NJ;

**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/260,807 01/10/2001

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 12/28/2001

|  |                               |                            |                           |                                |
|--|-------------------------------|----------------------------|---------------------------|--------------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input type="checkbox"/> no   | <b>STATE OR COUNTRY</b><br>NJ | <b>SHEETS DRAWING</b><br>9 | <b>TOTAL CLAIMS</b><br>16 | <b>INDEPENDENT CLAIMS</b><br>2 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                               |                            |                           |                                |
| Verified and Acknowledged  | Examiner's Signature          | Initials                   |                           |                                |

**ADDRESS**

John A. Caccuro  
9 Ladwood Drive  
Holmdel, NJ 07733

**TITLE**

Method and apparatus for hierarchical bandwidth distribution in a packet network

|                                   |   |  |
|-----------------------------------|---|--|
| <b>FILING FEE RECEIVED</b><br>740 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees                              |
|                                   |   | <input type="checkbox"/> 1.16 Fees ( Filing )                  |
|                                   |   | <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) |
|                                   |   | <input type="checkbox"/> 1.18 Fees ( Issue )                   |
|                                   |   | <input type="checkbox"/> Other _____                           |
|                                   |   | <input type="checkbox"/> Credit                                |